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IMAGES IN CARDIOLOGY

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Coronary artery giant aneurysm with fistulas to the left ventricular diverticulum

A 71-year-old man was admitted for investigation of an abnormal cardiac silhouette on chest x ray film (panel A). He had no chest symptoms. Multislice computed tomography revealed a giant aneurysm formation (71 × 88 mm) slightly enhanced by contrast medium. The circumflex coronary artery ran over the surface of this aneurysm, but the communication could not be well defined (panel B). Selected left coronary angiography showed that the giant aneurysm received blood flow from the elongated circumflex artery (panel C). Left ventriculography showed that there was a diverticulum of the basal posterolateral left ventricular (LV) wall and that it was connected to the aneurysm via a vessel reversely contrasted in systolic phase (panel D).

Based on these findings, we diagnosed a coronary fistula originating from the circumflex artery associated a giant aneurysm draining into the LV diverticulum.

The patient underwent resection of the aneurysm. As expected, there were two holes connecting the circumflex artery and the LV diverticulum (panel E). Ligation of the distal circumflex artery and closure of the LV diverticulum with a Dacron patch were performed. The postoperative course was uncomplicated, and the patient has remained asymptomatic.

Coronary artery fistulas with a giant aneurysm are very rare, and, in most cases, drain to the coronary sinus, pulmonary artery or right ventricle. This is the first case report of a coronary artery giant aneurysm fistulating into the LV diverticulum.

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